

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: DATA RECOVERY TECHNIQUES IN STORAGE  
SYSTEMS

Attorney Docket Number:: 21154-000910

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 8

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Matthew  
Middle Name:: J.  
Family Name:: Foley  
Name Suffix::  
City of Residence:: Santa Clara  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 637 Frederick Avenue  
City of Mailing Address:: Santa Clara  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Lewis  
Middle Name::  
Family Name:: Kawecki  
Name Suffix::  
City of Residence:: Kings Beach  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 8728 Loch Levon Avenue  
City of Mailing Address:: Kings Beach  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 96143

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Nam  
Middle Name::  
Family Name:: Le  
Name Suffix::  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2764 Glauser Drive  
City of Mailing Address:: San Jose  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95133

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Rony  
Middle Name::  
Family Name:: Yakir  
Name Suffix::  
City of Residence:: Mountain View  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 148 Eunice Avenue  
City of Mailing Address:: Mountain View

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94040

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number::

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/430,464	12/02/02

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
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### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::